PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number
09/4/5643

		CLAIMS AS	FILED - (Column		(Colu	nn 2)		SMALL EN		OR	OTHER SMALL I	1
TO	TAL CLAIMS							RATE	FEE		RATE	FEE
FC	PR		NUMBER F	FILED	NUMBI	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGEA	BLE CLAIMS	32 min	us 20=	*			X\$ 9=		OR	XS18=	
INC	EPENDENT CL	AIMS	<u>3</u> mir	nus 3 =	*			X43=		OR	X86=	
ML	LTIPLE DEPEN	DENT CLAIM PE	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than ze	ro, enter	r "0" in c	olumn 2		TOTAL		OR	TOTAL	
	C	LAIMS AS A	MENDED	- PAR		(Column 3))	SMALL E	ENTITY	OR	OTHER SMALL	li di
AMENDMENT X		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 32	Minus	3	2	= -		XS 9=		OR	X\$18=	
ME	Independent	. 3	Minus	***	3	=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	T CLAIM		j	+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colui	mn 2)	(Column 3)		ADDII. 7 CC 1		•		
AMENDMENT BY	·	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 52	Minus	# ≾	>	=		XS 9=		OR	X\$18=	
	Independent	· 3	Minus	*** €	3	<u> </u> = .		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JUIPLE DEF		+145=		OR	+290=				
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE				
	-	(Column 1)		1								
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 32	Minus	** _	32	=		X\$ 9=		OR	X\$18=	
	Independent	. 3	Minus	***	3	=	_	X43=		OR	X86=	
L	HIRST PRESE	NTATION OF MI	J	+145=		OR	+290=					
• 1	f the entry in colu	mn 1 is less than the	ne entry in colu	ımn 2. writ S SPACE	e "0" in co	lumn 3. In 20. enter "20	0. ⁻	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
** If the "Highest Number Previously Raid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Best Available Copy

									Application or Docket Number					ber		
PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999											09/615643					
CLAIMS AS FILED - PART I (Column 1) (Column 2)										LL I	ENTITY	OR	OTHER			
FO	R		NUMBE	R FILED		NUMBER EXTRA			RATI	Ē	FEE	Ì	RATE	FEE		
ВА	SIC FEE								٠,٠		345.00	OR		690.00		
TO	TAL CLAIMS		3.2 minus 20=			. 12			X\$ 9= 10 P			OR	X\$18=			
IND	EPENDENT CL	AIMS	_3 minus 3 =			•			X39=			OR	X78=			
MULTIPLE DÉPENDENT CLAIM PRESENT								+130=			OR	+260=				
• If	* If the difference in column 1 is less than zero, enter "0" in column 2										453	OR	TOTAL			
CLAIMS AS AMENDED - PART II												OTHER				
_	(Column 1) (Column 2) (Column 3)							SMALL ENTITY				OR	SMALL			
ENT A		REM Al	IAINING FTER NOMENT		PI	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE_		
AMENDMENT	Total	•	31	Minus	**	32	= /	I	X\$ 9=			OR	X\$18=			
	Independent FIRST PRESE	ALTATIC	3	Minus	enic		=		X39=	=		OR	X78=			
Н	FIRST PRESE	MIAIR	JN OF MC	DETIFICE DEF	CINI	DENT CLAIM			+130:	=		OR	+260=			
												OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)									ADDIT. F	CCI			ADDIT: 1 CE			
8	CHARLE.		LAIMS MAINING		HIGHEST NUMBER P	PRESENT	ſ			ADDI-			ADDI-			
ENT E		A	FTER NDMENT			REVIOUSLY PAID FOR	EXTRA		RATE	•	TIONAL FEE		RATE	TIONAL FEE		
AMENDMENT	Total ·	• (3/	Minus	**	32	=		X\$ 9=	п.		OR	X\$18=	•		
AME	Independent FIRST PRESE	AITATI	3 2N OE W	Minus	••	DENT CLAIM]=		X39=			OR	X78=			
	FINOT PRESE		JI OF MIC	JEHIT LE DEF	LIV!	DENT CLAIM		ſ	+130:	=		OR	+260=			
-									TOT			OR	TOTAL			
	(Column 1) (Column 2) (Column 3)								ADDIT. F	tt I		,	ADDIT. FEE			
,	Addition .	CI	_AIM\$	36.		HIGHEST		ſ		-1	ADDI-			ADDI-		
AMENDMENT C		A	IAINING FTER NDMENT			NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	ı	RATE		TIONAL FEE		RATE	TIONAL FEE		
	Total	. «	3/	Minus	**	32	=		X\$ 9=	. ·		OR	X\$18=			
	Independent	<u> •</u>	3	Minus	••	<u>. 3</u>	=	Ī	X39=			OR	X78=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									┪		υn				
٠,	If the entry in colu	mn 1 is i	less than th	ne entry in colu	mn 2	, write "0" in co	lumn 3.	Į	+130= TOT			OR	+260=			
	If the "Highest Nu If the "Highest Nu	mber Pr	eviously Pareviously Pare	aid For" (N THI: aid For" (N THI	S SP S SP	ACE is less that ACE is less that	n 20, enter "20." n 3, enter "3."	-	ADDIT. FO	EE			TOTAL ADDIT. FEE			
""If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.																